EXECUTIVE LOBBYING SUPPLEMENTAL REGISTRATION FORM

· ...

	Instructions	STATE OF THE PARTY
	Print in ink or type. Complete form and return to Board of Ethics, 2415 Qualt Dr., 3 ⁻⁴ Floor, Baton Rouge LA 70308, or fax to (225) 763-8787. For information or assistance, call	FOR OFFICE USE ONLY Postmark Date: 5/2/0 [
!	(225) 763-8777 or (800) 842-6630. No fee is required. This form must be submitted within 5 days of any changes in your registration form or to add employers or those you represent. It must be submitted within	Supp.08
	10 days of any termination of employment or representations.	اس بامه
1. N	IMB Babcock Michelle Shi-ley	ack v
	Last First / Mi	1
_	NAME	3071510
C	HANGE Last First MI	
2.	BUSINESS PHONE 225-344-0911 (Area Code) Phone Number	# 1 1
3.	FAX PHONE 225 - 761-9088	:
4.	BUSINESS ADDRESS 11420 April Huy 5tr. 102 E	Ste 14 708fe
	MAILING ADDRESS 11420 Atrice Hay St. 102 B	
5.	EMPLOYER Babak Low Firm	State Zip
6.	EMPLOYER'S ADDRESS 114 20 Allice the Sk. 100 Bk.	1 7086 Zip
7.	Have you ceased or terminated all lobbying activities requiring registration? Yes	No
в.	LIST BBLOW (a) Names of persons, groups, or organizations which you are adding or elimperson, group, or organization listed; (c) the type of business each is engaged in or the put group; (d) whether or not the client or someone else pays you to lobby, and (e) the date of	MOSE of function of the organization or
	1) Name Reijonal Health Can Group	
	Address A3/1 Bluebonnet Blud BR, V	1 70809
	Business or purpose Hospices and Home Health	tare

New Representation
Does this person pay you?

y you?____Y\s

IFNO, who pays you? Bebook Law Firm

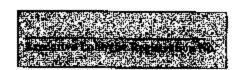
Terminated Representation as of ______

Form 505, Rev. 7/04

Page 1 of 2

HAND DELIVERED

EXECUTIVE LOBBYING SUPPLEMENTAL REGISTRATION FORM



2)	Namc			
	Add	reas		
	Busi	ness or purpose		
		New Representation Does this person pay you?		
		If No, who pays you?		
		Terminated Representation as of		
3)	Name			
	Address			
	Busi	пеяв от ригрозе		
		New Representation Does this person pay you?		
		If No, who pays you?		
		Terminated Representation as of		

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist